

CFBHPP Committee

**Henrico Training Center
7701 Parham Road**

December 13, 2007

Meeting Summary

I. Welcome and introductions

Brian Meyer

Brian opened the meeting and welcomed Ray Ratke and thanked him for attending to provide an update on restructuring the Commonwealth's approach to children's behavioral health.

II. Approval of minutes

Brian Meyer

**III. Restructuring the Commonwealth's
Approach to children's behavioral health**

Ray Ratke

Pertinent points:

- Ray presented information related to the Annie Casey Foundation and recommendations made by them regarding children's services.
- Casey recommendation made a recommendation made previously for a cross-department, cross-agency leadership for children's services.
- Certain functions within VDSS, CSA, and DMHMRSAS will report to Ray on behalf of the Secretary of HHR.
- Ray views this as a two year assignment to create a structure to sustain the focus and attention on children's services.
- Large part of the focus will be driven by the focus of the First Lady; with high expectations and a steering committee to ensure a reform of children's services.
- The First Lady's focus and attention is on child welfare.
- 60-70% of the children served in CSA have a mental health diagnosis; Virginia is last in the country with achieving permanency for children in foster care; 5% of the children are placed with relatives unlike other sections of the country. For children their first placement is residential care; making it difficult to move into a permanent home. Many children who leave foster care end up homeless.
- Serving children in their home and communities with a common set of values and vision and translating at the local level into best practices to implement the vision through practice.

- Identifying 13 localities across the state, localities with the highest number of children in residential care, congregate or residential treatment. Plan is to bring these localities together to develop a common vision and practice model, working with public and private providers, developing a broader array of services over a one to two year period with eventual state-wide implementation.
- Budget initiatives call for funding and reform initiatives. Foster care rates historically have been marginally acceptable, has implications for recruitment and retention of foster parents. 25% increase in rate paid to foster families; funding for localities to assist with recruitment of foster families; CSA funding for software for producing outcome data.
- Proposal to create financial incentives for CSA for community-based services; the amount localities paid to them will be reduced. There will be a reduction in the rate localities pay for foster care. There is a proposed increase in the match rate to balance the development of community based options.
- Policy issues need clarification; SEC to deal with the role CSBs play at the local level related to CSA, this needs to change. CSBs need to play a more central role; Hampton is one example of a CSB providing intensive care coordination. This is a policy clarification with the development of guidelines and expectations. Reduction in residential care of one day saves the Commonwealth \$1 million.
- There are more state dollars in CSA than exists in DMHMRSAS for children's services.
- A second policy issues relates to start-up and providing mechanism for the development of services building start-up costs into the rate.
- Mental health must be at the center of many of the placement decisions; a strengthening and expansion of mental health treatment at the local level for children's services. Expanded role for CSA for care coordination.
- Governor is holding a press conference on Friday related to his initiatives for mental health; additional resources for children services, focused on case management for children's services at the local level. There has never been a targeted funding stream for case management.
- Ray acknowledged the contribution of Shirley Ricks to children's services.

Discussion:

- The importance of early intervention and preventive services with the focus of strengthening families.
- Part of the vision and culture needs to include respect for families, the provision of wrap-around services, and conveying the goal to reunite the family as soon as possible.
- Where does substance abuse services fit in planning for the provision of services. Around substance abuse and mental health there is a stigma associated with services. There are effective approaches for dealing with substance abuse however these services are labor intensive.

- Question was posed regarding the future of this group; an opportunity to look at how we all work together, the best use of anyone's time. DMHMRSAS is in the bottom five of states that have investments in infrastructure; where do we direct resources, in a targeted way, can we do this differently toward maximizing available resources.
- Comment was made to ensure the inclusion of the juvenile justice system into this holistic approach to children's services, to bring DJJ to the table. The second piece is education. The rates have been so poor, therapeutic foster care has been the option because the rates are higher. Another system that needs to be brought into the reform initiative is education.
- Importance of securing school-based mental health services.
- The 13 communities selected were communities with the highest number of kids, urban and suburban areas; some of the tools may not be practical for some rural areas.

IV. Status of 2007 report recommendations

Shirley Ricks

Funding requests:

- Funding for mental health services in schools; \$1.8 million
- Funding for family support, \$500,000
- Funding for mental health clinicians in CSBs
- Funding for workforce development and slots for child psychiatric fellows and child psychologist interns

Discussion about restructuring at DMHMRSAS:

- Questions around why the director's position was abolished.
- A comment about another significant change at the Department involving changes in the assistant commissioner for facility services position.
- There is a need for an integrated voice for children's services. What is the role of this committee? Is SLAT a natural place for this committee to be placed? Is there an alternate process to getting the work done?
- Changing the voice of mental health with CSA, it is a significant issue but not all of the issues related to other children with mental health issues.
- This group has played an important role in children's services.

V. Future directions

Vicki Hardy-Murrell

Pertinent points:

- This committee was integrated with the Special Populations workgroup.
- This committee will need to blend with one another group; where is the most appropriate place to blend the group and then to have discussions with that group.

- Should this be an advisory group? Should this committee be moved to the into the Child and Family Advisory committee or to SLAT? Concerns were expressed about the narrow focus of SLAT.
- There are other issues moved to statewide coalitions, advocacy led, with representation from state agencies. The key for this reform effort will be the relationship of this committee to the core group; to influence policy direction, to ensure that the voice of this group is heard through that process. What is going to be the need for the core group to hear things and how does that message get conveyed. This committee needs to think about what this group has to offer and to share this with Ray Ratke.
- The steering committee includes representatives from the following localities: Richmond, Fairfax, Roanoke County and City, Norfolk, Harrisonburg, Hampton, Chesterfield, Henrico.
- Comment was made about this group serving as an advisory group to Ray looking at children's services across the board. Vicki views this as an important role. The children's advisory committee will change as well.
- Brian asked the committee to consider that the agenda for the January meeting for a discussion about the future of this committee and to consider an assignment of staff to this committee. Is the January meeting premature for this discussion to occur? Is February a better time for the committee to meet?
- Possible suggestion might be to consider the value of an interagency public private role; that the SLAT is too narrow, need other players at the table, Education, DJJ, the academic community and family representation; need a mechanism to broaden the perspective. The reform systems will impact these other systems.
- The steering committee will have workgroups.
- Consensus that more discussion needs to occur; to move fast, to meet in January for a couple of hours to outline a proposal, the logic for the proposal, the rationale for the proposal, etc. Invite Ray to a February meeting after putting a proposal together for an hour discussion about the proposal.
- There is need for informal communication with Ray; an outline for the informal communication as well.

Election of chair:

- Discussion about leadership for the committee since Brian's term as chair is over and this is the last meeting he will chair.
- An interim chair to oversee transition period over the next six months.
- An individual with an established relationship with Ray.
- Brian discussed interim chair role with Vicki and her willingness to chair this group for six months.
- Brian moved Vicki's nomination as chair for the interim period; seconded by Don. Other nominations? Motion passed.

- There was a suggestion for a co-chair and Brian asked for a volunteer; for the six month period during this transition. Shirley nominated Don Roe, seconded by Wayne Barry. Other nominations? Motion passed.

VI. System of Care Grant – request for feedback and comments from committee members

- The intent of the grant application is to assist states in promoting and developing systems of care in communities
- In response to the grant announcement; what does the state need in infrastructure and resources for addressing developing systems of care
- Develop a model to assist communities to develop systems of care.
- Workforce development-training resources for providers
- Enhancing cultural competence

VI. Luncheon

VII. Adjourn